

MOTOR BOAT INSURANCE PROPOSAL FORM

Particulars of Proposer:

1. Proposer Full Name _____
2. Address: _____ Tel. No.: _____
3. Occupation: _____ Date of Birth: _____
4. Name of Owner (if not the Proposer) _____

Particulars of Vessel:

1. Name & Ex Name: _____

2. Builder's Name: _____ Year Built: _____
3. Date taken over by present Owner: _____
4. Type / Class: _____ Flag: _____
5. Material of Hull: _____
6. Date Purchased: _____ Price Paid: _____
7. Number of Passengers: _____
8. Length: _____ Breadth: _____ Draft: _____
Tonnage: _____

Particulars of Machinery:

1. Engine Manufacturer/ Make: _____ Type: _____
2. Number of Engines: _____ Year Built: _____
3. HP of each Engine: _____ Vessel Max. Speed: _____
4. Fire Extinguishers a) Manual b) Automatic c) Water d) CO2
e) Others

Do you wish the outboard motor against dropping off and falling overboard? _____

Please State Make, Model, Age and H.P of outboard motor _____

Particulars of Vessel:

1. Use of Vessel: _____
2. Mooring: a) Marina Pontoon b) Marina Stem to c) other (please state)
d) Pile e) Swing
3. Where will the Vessel be moored _____
4. Months in-commission _____
5. Place of Lay-up: _____
6. Navigation Limit: _____
7. Number and Nationality of Crew: _____

Sum to be Insured: (Current Market Value)

- | | |
|-----------------------------------|------------|
| 1. Hull, Machinery and Equipment: | US\$ _____ |
| 2. Tender / Dinghy: | US\$ _____ |
| 3. Outboard Motor: | US\$ _____ |
| 4. Other Specify _____ | US\$ _____ |
| 5. Personal Effects | US\$ _____ |
| 6. Third Party Liability Cover | US\$ _____ |
| 7. Deductible required | US\$ _____ |

8. Is Water- Skiers Liability required? A) Yes B) No

Limit required: US\$ _____

Other Information:

1. Name of Present Insurer: _____

2. Claims Record for last 5 years (i.e., Date, Type and Amounts Paid) _____

3. General Condition of the Vessel: _____

Name: _____

Signature: _____

Date: _____